

# Montgomery County Government

## Your Vision Care Plan

National Vision Administrators (NVA) has a network of qualified Ophthalmologists, Optometrists and Opticians to service you.

### Your Benefits

**Vision Examination** (every 12 months) - A complete analysis of the eye and related structures to determine the presence of vision problems. Contact lens evaluation and fitting or additional supplemental tests are not covered under the NVA Participating Provider network benefit.

**Lenses** (every 12 months)

**Frames** (every 24 months) - Frames within the plan allowance are covered in full when you use an NVA Participating Provider. If you select a frame that costs more than the wholesale allowance established for your program (or a large frame that requires oversized lenses) there will be an additional charge.

**Elective (Cosmetic) Contact Lenses** - When contact lenses are chosen for reasons other than below, they are considered elective in nature. A \$100.00 allowance will be made toward their cost, plus the allowance for the vision examination.

**Necessary Contact Lenses** - Contact lenses are considered medically necessary for one of the following conditions:

- ☐ Following cataract surgery
- ☐ To correct extreme visual acuity problems not correctable with spectacle lenses.
- ☐ To correct for significant anisometropia
- ☐ Keratoconus

### Service

### Schedule of Benefits

When you use any provider  
of your choice outside of  
the NVA network

### Schedule of Benefits

When you use the NVA  
PPO Network Option

Routine eye examination

Up to:  
\$64.00 Optometrist  
\$84.00 Ophthalmologist

Covered in full  
Covered in full

Eyewear  
Lenses per pair (Clear Glass/Plastic)

Single Vision  
Bifocal  
Trifocal  
Lenticular  
Options

Up to:  
\$50.00 maximum/\$25.00 each lens  
\$90.00 maximum/\$45.00 each lens  
\$110.00 maximum/\$55.00 each lens  
\$310.00 maximum/\$155.00 each lens  
N/A

Covered in full  
Covered in full  
Covered in full  
Covered in full  
Provided under the plan at  
the actual wholesale cost  
plus 25% billed to the  
employee.

Frames

\$50.00 based on retail cost

\$50.00 wholesale allowance  
Frames exceeding the  
allowance billed to the  
employee at the wholesale  
difference plus 20%.

Cosmetic\*

\$100.00 plus routine eye  
examination fee

\$100.00 plus routine eye  
examination fee  
\*NVA providers will charge  
UCR less 25% for cosmetic  
contact lenses.

Contact lenses (per pair if medically necessary) \$600.00 maximum

Up to \$600.00 maximum



**You may choose one of the following options to obtain vision care.**

### **How Do I Use The Plan?**

You may verify eligibility prior to scheduling your appointment by contacting NVA's Customer Service Department (800) 672-7723.

#### **Option I**

If you Choose to See an Optometrist, Ophthalmologist, or Dispensing Optician Who Is Not An NVA Participating Provider.

1. Make an appointment and receive the necessary services from the provider. Pay the doctor his/her full fee and obtain an itemized receipt which must contain the following information:
  - ☐ Patient's name
  - ☐ Date service began
  - ☐ The services and materials received
  - ☐ The type of lenses you received (e.g. single vision)
  - ☐ The employee's social security number
  - ☐ The employee's signature
2. Mail the completed claim form and itemized receipt to:

National Vision Administrators  
A Division Of  
National Prescription Administrators, Inc.  
P.O. Box 1981  
East Hanover, New Jersey 07936-1981
3. You will then be reimbursed directly according to the Non-Participating Provider Reimbursement Schedule.

#### **Option II**

If You Choose to See An NVA Participating Provider

**Step One:** When you are ready to obtain vision care services, call your NVA participating doctor. If you need to locate an NVA Participating doctor, call National Vision Administrators at (800) 672-7723, in New Jersey (973) 503-1000.

**Step Two:** When making an appointment, identify yourself as an NVA member sponsored by Montgomery County Government, Sponsor #1044. The participating doctor will also need the covered employee's identification number (the social security number). The participating doctor will contact NVA to verify your eligibility and plan coverage. The participating doctor will also obtain authorization for services and materials. If you are not eligible, the doctor will notify you.

**Step Three:** At your appointment, the participating doctor will provide an eye examination and determine if eyewear is necessary. The participating doctor will itemize and charge you for any non-covered items and have you sign a claim form to document the services received.

#### **Option III**

If you Choose to See A Non-Participating Doctor For An Examination and Have An NVA Participating Doctor Fill Your Prescription

1. After receiving an examination from the doctor, pay the doctor his/her exam fee. Obtain a receipt for the exam and the prescription for your lenses. Send your completed claim form and exam receipt to NVA. You will be paid directly according to the Non-Participating Reimbursement Schedule for your exam.
2. Call one of the NVA participating doctors and make an appointment to have your prescription filled.
3. Take your prescription to the NVA participating doctor on your first visit.
4. The NVA participating doctor will fit you with your new glasses/contacts and take care of any further paperwork for payment. The NVA participating doctor will be paid by NVA for dispensing your glasses/contacts.

### What Vision Services And Materials Are Limited Or Not Covered Under This Plan

**Extra Cost** – The plan benefits associated with the NVA Participating Provider network are designed to cover your visual needs rather than elective materials. There will be extra costs involved if your select materials or services which are elective in nature, such as....

- ☐ Oversize lenses
- ☐ A frame that costs more than the plan allowance
- ☐ Two pair of glasses in place of bifocals
- ☐ Elective contact lenses (in excess of the plan allowance)
- ☐ Contact lens evaluation and fitting
- ☐ Tinted or coated lenses
- ☐ Gradient tints
- ☐ Additional supplemental tests outside the standard vision examination
- ☐ Any other materials or services not necessary for the patient's visual welfare.

**Items Not Covered** – There are no benefits for professional services or materials connected with:

- ☐ Orthoptics or vision training, subnormal vision aids, or non-prescription lenses.
- ☐ Lenses and frames furnished under this program which are lost or broken. These will not be replaced unless you are eligible for frames or lenses at that time.
- ☐ Medical or surgical treatment of the eyes.
- ☐ Services or materials provided as a result of any Workers' Compensation Law or similar legislation.
- ☐ Any services or materials provided by any other vision care plan, or group benefit plan containing benefits for vision care.
- ☐ Services you receive before vision coverage becomes effective or after coverage ends.

### Refractive Surgery

In addition to the above benefits, an arrangement has been made for employees to receive a discounted rate on Refractive Surgery (Lasik, PRK, Lens implants).

**Important:** The employee is responsible for all charges relating to Refractive Surgery. Neither Montgomery County Government or NVA will provide any reimbursement for Refractive Surgery.

Contact NVA for a brochure which describes the policies and procedures relating to Refractive Surgery in order to obtain the discounted rate.

If You Have Any Questions About Your Vision Care Coverage Or The Filing Of Your Claim, Please Contact The NVA Customer Service Department At: 1-800-672-7723.

